UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.			42P16966				
First I	nventor	Rame	shkumar G. Illikkal				
Title	Method and System to Pre-Fetch a Protocol Control Block for						
	Networl	Processing					
Express Mail Label No.		hel No	EV225525960LIC				

11/12/03

Date

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. EV325525869US											
APPLICATION ELEMENTS					=		ail Stop Patent Application	1			
See MPEP chapter 600 concerning utility patent application contents				A	ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
1. Fee Tran (Submit an o	smittal Form (e.g., PTO/SB/17) riginal and a duplicate for fee processing)				7. CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)						
2. Applicant See 37 C	claims small entity status. FR 1.27.				 Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) 						
- Descripti - Cross Re - Stateme - Reference	d arrangement ive title of the eferences to F nt Regarding ce to sequence	es <u>14</u>]	a. b. c.	Spec i. [cification Seque CD-ROM or paper	idable Form (CRI ence Listing on: CD-R (2 copies) rifying identity of	or .	,6834 U.S. 10/7126			
	or a computer program listing appendix - Background of the Invention						*				
- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. ☑ Drawing(s) (35 U.S.C. 113) [Total Sheets 4] 5. Oath or Declaration (signed) [Total Pages 3] a. ☑ Newly executed (original or copy) b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed) i. ☐ DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. ☐ Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and su specification following the title, or in an Application Data Sheet under ☐ Continuation ☐ Divisional ☐ Continuation-in-p Prior application Information: Examiner				10.	(when there is an assignee) 11.						
part of the disclosure	of the accompany	PPS only: The entire disclosur ying continuation or divisiona d from the submitted applicat	i application and	plication, fi is hereby	ncorpora	an oath or declaration ted by reference. The	on is supplied under Box incorporation <u>can only</u>	be relied upon wher	n		
			. CORRESI	PONDEN	CE ADI	DRESS					
□ Customer Number			791			or	· Correspond	dence address belov	v		
Name Plakaly Sakalaff Taylor & Zafman LLD											
Blakely, Sokoloff, Taylor & Zafman LLP Address 5285 S.W. Meadows Road, Suite 101											
City Lake Oswego		Is	State	ate Oregon Zip Coo		Zip Code	97035				
Country			Telephoi			684-6200	Fax	(503) 684-3	245		
Name (Print/	Type) Lisa	Tom		<u></u>		Registration No	o. (Attorney/Agent)	52,291	$\overline{1}$		

FEE TRANSMITTAL		Complete if Known				
	[Application Number				
for FY 2003		Filing Date				
Effective 01/01/2003. Patent fees are subject to annual revision.		First Nam	First Named Inventor Rameshkumar G. Illik			
Applicant claims small entity status. See 37 CFR 1.27.		Examiner	Name			
TOTAL AMOUNT OF PAYMENT (\$) 986.		Group/Art			4071/0//	
TOTAL AMOUNT OF PAYMENT (\$) 986.	υυ	Attorney [Oocket	No.	42P16966	
METHOD OF PAYMENT (check all that apply)					E CALCULATION (continued)	
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None	3.	ADDITIO	NAL F	EES		
Check ☐ Credit card ☐ Money ☐ Other ☐ None Deposit Account	La	Large Entity Small Entity				
	Fe		Fee	Fee	-	
Deposit Account 02-2666	Cox	de (\$)	Code	(\$)	Fee Description	Fee Paid
Number	105	_	2051	65	Surcharge - late filing fee or oath	
Deposit Deposi	105	2 50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	205	3 130	2053	130	Non-English specification	
The Commissioner is authorized to: (check all that apply)	181	2 2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	180	4 920°	1804	920 •	Requesting publication of SIR prior to Examiner action	
Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	180	5 1,840°	1805	1,840 *	_	
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account	125	1 110	2251	55	Extension for reply within first month	
FEE CALCULATION	125		2252	210	Extension for reply within second month	
1. BASIC FILING FEE	125	3 950	2253	475	Extension for reply within third month	
Large Entity Small Entity	125		2254	740	Extension for reply within fourth month	
Fee Fee Fee Fee Description Fee Paid	125	5 1,210	2255	605	Extension for reply within fifth month	
Code (\$) Code (\$)	140	· ·	2401	165	Notice of Appeal	
1001 770 2001 385 Utility filing fee 770.00	140	2 330	2402	165	Filing a brief in support of an appeal	
1002 340 2002 170 Design filing fee	140	3 290	2403	145	Request for oral hearing	
1003 530 2003 265 Plant filing fee 1004 770 2004 385 Reissue filing tee	145	1 1,510	2451	1,510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filing fee	145	2 110	2452	55	Petition to revive - unavoidable	
	145	3 1,330	2453	665	Petition to revive - unintentional	
SUBTOTAL (1) (\$) 770.00	150	1 1,330	2501	665	Utility issue fee (or reissue)	
2. EXTRA CLAIM FEES Extra Fee from	150	2 480	2502	240	Design issue fee	
Claims below Fee Paid	150	3 640	2503	320	Plant issue fee	
Total Claims 25 20 = 5 X 18.00 = \$90.00	146	0 130	2460	130	Petitions to the Commissioner	
Independent Claims 4 3 = 1 x 86.00 = \$86.00	180	7 50	1807	50	Prosessing fee under 37 CFR 1.17(q)	
Multiple Dependent	180	6 180	1806	180	Submission of Information Disclosure Stmt	
Large Entity Small Entity	802	11 40	8021	40	Recording each patent assignment per property (times number of properties)	40.00
Fee Fee Fee Fee <u>Fee Description</u> Code (5)	180	9 770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18 2202 9 Claims in excess of 20	181	0 770	2810	205	For each additional invention to be	
1201 86 2201 43 Independent claims in excess of 3	'0'	"	20.0	300	examined (37 CFR § 1.129(b))	
1203 290 2203 145 Multiple Dependent claim, if not paid 1204 86 2204 43 **Reissue independent claims over original	180	1 770	2801	385	Request for Continued Examination (RCE)	
1204 86 2204 43 **Reissue independent claims over original patent	180	2 900	1802	900	Request for expedited examination	[
1205 18 2205 9 **Reissue claims in excess of 20 and over	Othe				of a design application	
, original patent]	Other fee (specify)				
SUBTOTAL (2) (\$) 176.00	* Red	northy Rooin Effort Ena Daile			SUBTOTAL (3) (\$)	40.00
**or number previously paid, if greater, For Reissues, see below		* Reduced by Basic Fiting Fee Paid			(0)	40.00
SUBMITTED BY					Complete (if applicabl	e)
Name (Print/Type) Lisa Tom		Registration (Attorney/Age		5	52,291 Telephone (503) 684-	6200

11/12/03

Date

Signature